Case 1:08-cv-01964

Document 13 Filed 07/14/2008 Page 1 of 1 PROCESS RECEIPT AND RETURN

U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.



PLAINTIFF Antione Leron Willis						COURT CASE NUMBER 08C1964			
DEFENDANT State of Illinois, et al.						TYPE OF PROCESS S/C			
	E OF INDIVIDUAL,						O SEIZE O	R CONDEMN	
Jose	ph Wagner, Ch			· · · · · · · · · · · · · · · · · · ·	Police	Station			
ADI	RESS (Street or RFD	, Apartment No., C	City, State a	nd ZIP Code)					
AT C.P.	D., C/O Super	visor of St	ıbpoena	s, 35 1 0 S.	Michiga	n Ave., Chica	ago, IJ	60653	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:						Number of process to be served with this Form - 285		1	
Antoine Leron Willis, #2006-0073927 Cook County Jail P.O. Box 089002 Chicago, IL 60608						Number of parties to be served in this case		1	
						Check for service on U.S.A.			
SPECIAL INSTRUCTION Telephone Numbers, and Pold			1	FIL JUL 14 MICHAEL W.	EC 4,20 2008 Y	M 3	Altemate /	Addresses, All Pold	
7		<u> </u>		ERK, U.S. DIS			DATE		
Signature of Attorney or other Originator requesting service on behalf of: PLAINTIFF DEFENDANT						TELEPHONE NUMBER		05-23-08	
SPACE BELOV	FOR USE O	F U.S. MAR	RSHAL	ONLY DO	O NOT	WRITE BELO	W TH	IS LINE	
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) Total Process District of Origin to Serve No. 24 No. 24				Signature of Author	orized USMS Deputy or Clerk Td Date 05-23-08				
I hereby certify and return on the individual, company	that I have personally corporation, etc., at the	z served, □ have leg ne address shown abo	gal evidence ove or on the	of service, 反 have o e individual, compar	executed as sl ny, corporation	nown in "Remarks", tho n, etc., shown at the ad	process de dress inserte	scribed ed below.	
I hereby certify and r	eturn that I am unable	to locate the indiv	idual, comp	oany, corporation, e	etc., named a	bove (See remarks be	low)		
Name and title of individ	Catto	Legal				usual place	residing in t of abode.	he defendant's	
Address (complete only if			Charges A	Advance Deposits	Amount ow	Date of Service 6 2 5 0 5 Signature of U.S. ed to U.S. Marshal or	<u>(1:1)</u>		
	ling endeavors)	D 63	.∌∤	-8	5	3.34	E		
REMARKS:	DUSA	Hour	n M'	ilos 12+			_		